Case 2:13-cv-00616-LOA Do	ocument 2 Filed 03/26	FILED LODGED RECEIVED COPY
		MAR 26 2013 Page 1 of 5
AO 239 (01/09) Application to Proceed in District Court Without Prepaying I	Fees or Costs (Long Form)	CLERK U.S. DISTRICT COURT DISTRICT OF ARIZONA
	ES DISTRICT COU for the District of ARIZONA	RT M DEPUTY
MARVIN RANDALL Plaintiff/Petitioner v. NATIONAL CREDIT SYSTEMS INC Defendant/Respondent)) Civil Action No.)	CV-13-616-PHX-LOA
APPLICATION TO PROCEED IN DISTRICT (Le	COURT WITHOUT PREI	PAYING FEES OR COSTS
Affidavit in Support of the Application	Instructions	
I am a plaintiff or petitioner in this case and declare	Complete all questions in t	his application and then sign it.

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Date:

that I am unable to pay the costs of these proceedings

and that I am entitled to the relief requested. I declare under penalty of perjury that the information below is

true and understand that a false statement may result in

a dismissal of my claims.

Do not leave any blanks: if the answer to a question is "0,"

"none," or "not applicable (N/A)," write that response. If

you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your

name, your case's docket number, and the question number.

3/26/2013

Income source		Average monthly income amount during the past 12 months			Income amount expected next month		
		You		Spouse	You		Spouse
Employment	\$	1,200	\$	N/A	\$ 1,000	\$	N/A
Self-employment	\$	Ø	\$		\$ Ø	\$	
Income from real property (such as rental income)	\$	d	\$		\$ Ø	\$	
Interest and dividends	\$	Ø	\$		\$ 0	\$	
Gifts	\$	Ø	\$		\$ ø	\$	
Alimony	\$	Ø	\$		\$ Ø	\$	
Child support	\$	Ø	\$		\$ Ø	\$	

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Retirement (such as social security, pensions, annuities, insurance)	\$	Ø	\$ NA	\$	Ø	\$ N/A
Disability (such as social security, insurance payments)	\$	Ø	\$	\$	Ø	\$
Unemployment payments	\$	Ø	\$	\$	Ø	\$
Public-assistance (such as welfare)	\$	φ	\$	\$	Ø	\$
Other (specify):	\$	Ø	\$	\$	Ø	\$
Total monthly income	: \$	1,000	\$	\$ 1	, 000	\$

2. List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
			\$
			\$

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment Gross monthly pay
		\$
	,	\$
		\$

4.	How much cash do you and your spouse have? \$
	Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
BANK OF AMERICA	CHECKING	s 10.00	s NA
		\$	\$
	·	\$	\$

If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

Assets owned by you or yo	ur spouse
Home (Value)	s N/A
Other real estate (Value)	\$ N/A
Motor vehicle #1 (Value)	\$ 4,000
Make and year: 2003 DODGE	
Model: RAM	
Registration #: AZ AWW 6100	
Motor vehicle #2 (Value)	\$ N/A
Make and year:	
Model:	
Registration #:	
Other assets (Value)	s b
Other assets (Value)	\$ \$

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
	\$	s N/A
	\$	\$
	\$	\$

7. State the persons who rely on you or your spouse for support.

Name (or, if under 18, initials only)	Relationship	Age
4/4	N/A	N/A
		1
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8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

	You	Your spouse
Rent or home-mortgage payment (including lot rented for mobile home) Are real estate taxes included? Yes No Is property insurance included? No	\$ 475	s N/A
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 10 20	\$
Home maintenance (repairs and upkeep)	s Ø	\$
Food	\$ 150	\$
Clothing	\$ # Ø	\$
Laundry and dry-cleaning	\$ 25 Ø	\$
Medical and dental expenses	\$ 40	\$
Transportation (not including motor vehicle payments)	s 0	\$
Recreation, entertainment, newspapers, magazines, etc.	s Ø	\$
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's:	s Ø	\$
Life:	\$ Ø	\$
Health:	s 6	\$
Motor vehicle:	s 40 115	\$
Other:	s Ø	\$
Taxes (not deducted from wages or included in mortgage payments) (specify):	\$	\$
Installment payments	Nation 1	
Motor vehicle:	\$ 300	\$
Credit card (name):	\$ \psi	\$
Department store (name):	\$ Ø	\$
Other:	s Ø	\$
Alimony, maintenance, and support paid to others	s Ø	\$

Regular expenses for operation of business, profession, or farm (attach detailed statement) Other (specify):		s Ø	\$	
		s Ø	\$	\$
	Total monthly expenses	s: \$ 1,100	s	
9.	Do you expect any major changes to your monthly income or expenses next 12 months?	or in your assets	or liabilities during t	the
	☐ Yes 🐧 No If yes, describe on an attached sheet.			
10.	Have you paid — or will you be paying — an attorney any money for services in connection with this case, including the completion of this form? ☐ Yes № No			
	If yes, how much? \$			
11.	Have you paid — or will you be paying — anyone other than an attorney (such as a paralegal or a typis) any money for services in connection with this case, including the completion of this form? Yes No			
	If yes, how much? \$			
12.	Provide any other information that will help explain why you cannot p / HAVE NOT BEEN ABLE TO SECURE DECENT EMPLOYMENT THE POSITIONS AVAILABLE ARE ONES RELOW MY LENGL.	IN A DOWN &	ELONOMY.	
13.	Identify the city and state of your legal residence. TEMPE, AZ			
	Your daytime phone number: 480 - 387 - 8130			
	Your age: Your years of schooling:			
	Last four digits of your social-security number:			